

GLEN ROSE ISD

TRS Medical Rates

2024 Plan Year

12 Pay

ACTIVECARE PRIMARY	Employer Contribution	Employee Contribution
Employee Only	\$406.00	\$99.00
Employee & Child(ren)	\$406.00	\$453.00
Employee & Spouse	\$406.00	\$958.00
Family	\$406.00	\$1,311.00

ACTIVECARE HD	Employer Contribution	Employee Contribution
Employee Only	\$406.00	\$113.00
Employee & Child(ren)	\$406.00	\$477.00
Employee & Spouse	\$406.00	\$996.00
Family	\$406.00	\$1,359.00

ACTIVECARE PRIMARY PLUS	Employer Contribution	Employee Contribution
Employee Only	\$406.00	\$186.00
Employee & Child(ren)	\$406.00	\$1,134.00
Employee & Spouse	\$406.00	\$601.00
Family	\$406.00	\$1,548.00

BLUE ESSENTIALS HMO	Employer Contribution	Employee Contribution
Employee Only	\$406.00	\$605.20
Employee & Child(ren)	\$406.00	\$1,187.00
Employee & Spouse	\$406.00	\$2,056.32
Family	\$406.00	\$2,208.90

ACTIVE CARE 2	Employer Contribution	Employee Contribution
Employee Only	\$406.00	\$607.00
Employee & Child(ren)	\$406.00	\$1,101.00
Employee & Spouse	\$406.00	\$1,996.00
Family	\$406.00	\$2,435.00